

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | R | 32 | 5/27 |
| FORMALITY REVIEW | JP | 1027 | 05/29/01 |
| RESPONSE FORMALITY REVIEW | HA | 258 | 8/28/01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
|----------|-------|
| Final | |
| Original | 03/27 |
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| Claim | Date |
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| Final | 5/27 |
| Original | 03/27 |
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| Claim | Date |
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| Final | |
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If more than 150 claims or 10 actions
staple additional sheet here

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JZ-83
08/29/01